

PLACE OF BIRTH

1. County of Gila

District of _____

Town of _____

or Globe

City of _____

Supplement Attached

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 172

County Registrar No. _____

Local Registrar No. 207

St. _____ Ward _____

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

2. Full name of child _____

3. Sex of Child

M.To be answered ONLY
in event of plural
births.

4. Twin, triplet or other _____

5. No., in order of birth _____

6. Legitimate? Yes

7. Date

of birth Sept 27 - 1927

Month day year

8. FATHER

Full name

Juan Flores

9. Residence

(Usual place of abode)

If nonresident, give place and state

Globe.

10. Color or race

Mex11. Age at last birthday 48 (Years)

12. Birthplace (city or place)

(State or country)

Mexico

13. Occupation

Nature of industry

Labour

14. MOTHER

Full maiden name

Anita Grijalva

15. Residence

(Usual place of abode)

If nonresident, give place and state

Globe az

16. Color or race

Mex17. Age at last birthday 31 (Years)

18. Birthplace (city or place)

(State or country)

Nacayaris
Mexico

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein
certified and including this child.)(a) Born alive and now living 8(b) Born alive but now dead 0(c) Stillborn 021. Were precautions taken against oph-
thalmia neonatorum?Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at 4 4 p. on the date above stated.
(Born alive or stillborn.)*When there was no attending physician or
midwife, then the father, householder, etc.,
should make this return. A stillborn child
is one that neither breathes nor shows other
evidences of life after birth.

Given name added from

a supplemental report

Month, day, year.

Registrar.

Signature

Address

Filed

Filed

19

(Physician or midwife)

Local Registrar.

County Registrar.

162-927-172